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OCT 04 2006

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October 4, 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Date: Wednesday, October 04, 2006 Application No.: 10/813,518 Filed: 03/30/2004

Examiner Joanne Silbermann Art Unit 3611 Office Action dated 07/12/2006

In re the Application of: Michael Santa Cruz For: **HAND GESTURE RECEIVER**

Attorney Docket number: 256.100

CONFIRMATION OF ELECTION OF SPECIES

Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

Confirming our earlier telephone communication to the Examiner, in response to the Restriction Requirement dated 07/12/2006, the applicant elects Species II, as recited in Claims 9 and 14. Applicant requests the Examiner cancel any claims directed to the non-elected species.

Respectfully yours,

Michael A. Shippey
Michael A. Shippey

Registration No.: 45,588

Customer code: 030040

OCT 04 2006

PTO/SB/21 (03-03)

Approved for use through 04/30/2003. OMB 0651-0031

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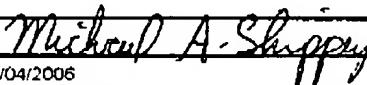
(to be used for all correspondence after initial filing)

		Application Number	10/613,518
		Filing Date	03/30/2004
		First Named Inventor	Santa Cruz, Michael
		Art Unit	3611
		Examiner Name	Silbermann, Joanne
Total Number of Pages in This Submission	2	Attorney Docket Number	256.100

ENCLOSURES (Check all that apply)

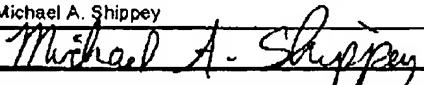
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
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Remarks		
Form SB 21 Transmittal = 1 page		
Election of species = 1 page		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Michael A. Shippey
Signature	
Date	10/04/2006

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